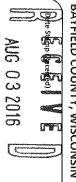
STATEMENT AND FEE TO:

Bayfield County
Planning and Zoning Depart.
PO Box 58
Washburn, WI 54891
(715) 373-6138

BAYFIELD COUNTY, WISCONSIN APPLICATION FOR PERMIT



Permit #: Date: Amount Paid: 16-0370 10-17-16

Bayfield Co. Zoning Dept

Refund:

INSTRUCTIONS: No permits will be issued until all fees are paid.
Checks are made payable to: Bayfield County Zoning Department.
DO NOT START CONSTRUCTION UNTIL ALL PERMITS HAVE BEEN ISSUED

□ Shoreland —) •	Section 1	3E 1/4, 1	PROJECT LOCATION	Authorized Agent: (Per	Contractor:	Address of Property: Stylic Setzel A Rd	E Dates &	TYPE OF PERMIT REQUESTED— Owner's Name:
☐ Is Property/Land within 1000 feet of Lake, Pond or Flowage If yescontinue	☐ Is Property/Land within 300 feet of River, Stream (ind. Intermittent) Creek or Landward side of Floodplain? If yes—continue —▶	Section 11 , Township 50 N, Range 4 W	SE 1/4, NW 1/4 GOV'TLOT LOT(S) CSM	Legal Description: (Use Tax Statement)	Authorized Agent: (Person Signing Application on behalf of Owner(s))	Contractor:	etzeld Rd	H James & Mazin Francisco	LAND USE
ke, Pond or Flowage If yescontinue	er, Stream (ind. Intermittent) If yes—continue		CSM Vol & Page	PHA: (23 digits) TAX 1	Agent Phone:	Contractor Phone: P	City/State/Zip:	SIGO OFTE	☐ SANITARY ☐ PRIVY ☐ Mailing Address:
Distance Structure is from Shoreline:	Distance Structure is from Shoreline:	Town of ON FUELD	Lot(s) No. Block(s) No.	e e e e e e e e e e e e e e e e e e e	Agent Mailing Address (include City/State/Zip):	Plumber:	13, 54814	SCOOL DETALDED BAYSING WIE	☐ CONDITIONAL USE ☐ SPE
**	j ***	Lot Size	Subdivision:	Recorded Docume	State/Zip):			VI SASA	□ SPECIAL USE □ B
□ Yes StNo	ls Property in Floodplain Zone?	Acreage		0 1 €	Written Author Attached	Plumber Phone:	Cell Phone:	A 215/7.	B.O.A. OTHER
∏ Yes ⊠No	Are Wetlands Present?			(i.e. Property Ownership) Page(s) 355	Written Authorization Attached Ores -No	hone:	*	215/779/5438	HER

Proposed Construction:	Existing Structu					/-	020:05 /	r.		Value at Time of Completion * include donated time & material
uction:	Existing Structure: (If permit being applied for is relevant to it)	-	A Existing	Property ,	☐ Run a Business on	☐ Relocate (existing bldg)	Conversion	☐ Addition/Alteration	□ New Construction	Project
	or is relevant to it)		& Shab	_ Foundation	○ No Basement	☐ Basement	☐ 2-Story	☐ 1-Story + Loft	A 1-Story	# of Stories and/or basement
Length:	Length: 105							X Year Round	Seasonal	Use
					X None	Ü	3	□ 2	<u>г</u>	# of bedrooms
Sidt.	Might: 20		☐ None	☐ Compost Toilet	☐ Portable (w/service contract)	☐ Privy (Pit) or ☐ Vaulted (min 200 gallon)	Sanitary (Exists) Specify Type: CO II	☐ (New) Sanitary Specify Type:	☐ Municipal/City	What Type of Sewer/Sanitary System Is on the property?
Height:	Height: 18				ract)	ted (min 200 gallon)	y Type: CO	/ Type:		e of / System perty?
								Xwell	□ City	Water

- CONTRACTOR - CON					wiunicipal use				7 zemeierdeliyse	N			TRASIDI EDICIDIONES CO	The state of the s			Proposed Use 🗸
Other: (explain)	Conditional Use: (explain)	Special Use: (explain) Sout Storing		Accessory Building Addition/Alteration (specify)	Accessory Building (specify)	Addition/Alteration (specify)	Mobile Home (manufactured date)	Bunkhouse w/ (\square sanitary, or \square sleeping quarters, or \square cooking & food prep facilities)	with Attached Garage	with (2 nd) Deck	with a Deck	with (2 nd) Porch	with a Porch	with Loft	Residence (i.e. cabin, hunting shack, etc.)	Principal Structure (first structure on property)	Proposed Structure
(×	(x	(105 × 100)		×	~ ×	(×	(x)	(×	(x)	(x)	(x)	(x)	(x)	(x)	(×)	(x)	Dimensions
	The state of the s	6360	Poli														Square Footage

FAILURE TO OBTAIN A PERMIT OF STARTING CONSTRUCTION WITHOUT A PERMIT WILL RESULT IN PENALTIES

I (we) declare that this application (including any accompanying information) has been examined by me (us) and to the best of my (our) knowledge and belief it is true, correct and complete. I (we) acknowledge that I (we) am (are) providing and that it will be relied upon by Beyfield County in determining whether to issue a permit. I (we) further accept liability which may be a result of Bayfield County relying on this information I (we) am (are) providing in or with this application; I (we) consent to country officials charged with administering country ordinances to have access to the above described property across the time for the purpose of inspection. Profy reasonable time for the purpose with the first of t

Authorized Agent: (If there (If yo

Address to send permit

W S

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RAINE

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Owner(s):

Date 8-3-16

61845

HoldF	Signat		Condit	Date o	Was	Grante Yes	ls Is Parc	Permit #:	Issua Permit		other pre Prior to the one previous marked by	Setbac Prior to th	Setbac	Setbac	Setbac Setbac	Setback from 1		T CO		*******	-AA		\	
Hold For Sanitary:	Signature of Inspector:	and a	ion(s):Town	Inspection Record: Date of Inspection:	Was Proposed Bu	Granted by Variance (B.O.A.) ∪ Yes □ No	Parcel a Subsel in Comm tructure No	6	Issuance Informa Permit Denied (Date):	(9)	e placement or ously surveyed or ously surveyed or a licensed surveyed surveyed or a licensed surveyed surveyed surveyed surveyed surveyed surveyed surveyed sur	k to Privy (k to Septic	k from the	k from the k from the	in in		(8)	Se Complet			· · · · · ·		(1) (2) (3) (6)
	ctor:		S):Town, Committee	× =	Was Parcel Legally Created Was Proposed Building Site Delineated	e (B.O.A.)	Is Parcel a Sub-Standard Lot Is Parcel in Common Ownership Is Structure Non-Conforming	-0370	nation (C	Stake or N N For The Co	corner or mark construction of orner to the oth eyor at the own	ortable, Construction of	Tank or Ho	Setback from the West Lot Line Setback from the East Lot Line	Setback from the North Lot Line Setback from the South Lot Line	Established	Description	Setbacks:	7				Show any (Show Location of: Show / Indicate: Show Location of (*): Show: Show: Show: Show any (*): Show any (*):
THOID FOR THE		-	or Board Co	=	 London State (State) 	Case #:	ot □Yes iip □Yes ng □Yes	_	Issuance Information (County Use Permit Denied (Date):	TICE: All Landstruction Construction Constru	ed by a licensed a structure mor a structure mor her previously suer's expense.	omposting) a structure with	Setback to Septic Tank or Holding Tank Setback to Drain Field	ne e	ine	Established Right-of-Way	Jn .	measured	above (n					ion of: cate: ion of (*):
			Condition(s):Town, Committee or Board Conditions Attached?		_Yes □ No				only)	and Use Perroll New One In The local	surveyor at the e than ten (10) f	in ten (10) feet			-	lay		Setbacks: (measured to the closest point)	Please complete (1) – (7) above (prior to continuing)				(*) wet	Propose North (I (*) Driw All Exist (*) Well (*) Lake
Herma			A	Inspected byτ	2		(Deed of Record) (Fused/Contiguous Lot(s))	Permit Date:	Sanitary Reason	nits Expire C & Two Famil	eet but less than	of the minimum	305 306	1920	548 598	25 to 10	Measi	SSI 70	3		See		lands; or (*)	Proposed Construction North (N) on Plot Plan (*) Driveway and (*) Fronte All Existing Structures on you (*) Well (W); (*) Septic Tan (*) Lake; (*) River; (*) Strea (*) Modander or (*) Classes
Hold For Affidavit:			Yes □ No-	ed byr	MAN CHI) No		Sanitary Number: Reason for Denial:	w Construct ne (1) Year I y Dwelling: , e, City, State	e. 1 thirty (30) feet i 1e Department b	Setback to Privy (Portable, Composting) Feet Market to Privy (Portable, Composting) From to the placement or construction of a structure within ten (10) feet of the minimum required setback, the	Feet		Feet Feet	Feet	Measurement				の) siapes ave	tion lan) Frontage res on your ptic Tank (S
		٠.	of No the	8		Præ □ Y		0-17-16	Ma	rom the ALL Muni											3		% 70%	ige Road (Name our Property k (ST); (*) Drain F im/Creek; or (*)
	. It will be a second of the s		No they need to be attach	PON BY	Were Property Lines Represented by Owner Was Property Surveyed	Previously Granted by Variance ☐ Yes ☐ No	Mitigation Required Mitigation Attached	0		NOTICE: All Land Use Permits Expire One (1) Year from the Date of Issuance if Construction or Use has not begun. For The Construction Of New One & Two Family Dwelling: ALL Municipalities Are Required To Enforce The Uniform Dwelling Code. The local Town, Village, City, State or Federal agencies may also require permits.	ther previously surveyed corner or marked by a licensed surveyor at the owner's expense. Our to the placement or construction of a structure more than ten (10) feet bit east than thirty (30) feet from the minimum required setback, the boundary line from which the setback must be measured must be visible from the previously surveyed corner to the other previously surveyed corner, or verifiable by the Department by use of a corrected compass from a known corner within 500 feet of the proposed site of the structure, or must be arked by a licensed surveyor at the owner's expense.	boundary line from which the setback must be measured must be visible from one previously surveyed corner to the	Setback to Well	20% Slope Area on pro Elevation of Floodplain	Setback from Wetland	Setback from the Lake (ordinary Setback from the River, Stream, Setback from the Bank or Bluff		9			0	·		Proposed Construction North (N) on Plot Plan (*) Driveway and (*) Frontage Road (Name Frontage Road) All Existing Structures on your Property (*) Well (W); (*) Septic Tank (ST); (*) Drain Field (DF); (*) Holding Tank (HT) and/or (*) Privy (P) (*) Lake; (*) River; (*) Stream/Creek; or (*) Pond (*) Worklands: or (*) Clance Over 2002
Hold For Fees:			attached.)	i Mus	ies Represe Was Pro	by Variance	□ Yes		# of bedrooms:	if Constructured To Equired To E	ck, the bounda	e setback mus		on prope dplain	etland	River, St	Pesciption	anges in pl		:				oad) *) Holding
ees:			decisio	o t	ented by Ow operty Survey	(B.O.A.)	No		ooms:	tion or Use Inforce The Use permits.	ry line from which are within 500 fee	t be measured m		тţ				Changes in plans must be approv						; Tank (HT)
	Date 20		\$.	Zoning District Lakes Classifica Date of Re-Ins	ved Ves	Case #:	Affidavit Required Affidavit Attached		Sanitary Date:	nas not begun. Iniform Dwelling	th the setback must te of the proposed sil	ust be visible from o				Creek		approved by the						and/or (*) Priv
	Date of Approval:			tion (Date:	Y(F), and <u>Y</u> ; Code.	be measured muse of the structure	ne previously sur	305	Yes			Mies	ed by the Planning & Zoning Dept.						y (P)
							Tyes ONO			<u>veii</u> (vv).	ist be visible fire, or must be	rveyed corne					Wieasurement	& Zoning				<u> </u>		
					\# \\ \# \\ \# \\ \# \\ \# \\ \# \\ \# \\ \# \\ \# \\ \# \\ \# \\ \# \\ \# \\ \# \\ \# \\ \# \\ \# \\ \# \\ \# \\ \# \\ \# \\ \# \\ \# \\ \# \\ \# \\ \# \\ \# \\ \# \\ \# \\ \# \\ \# \\ \# \\ \# \\ \# \\ \# \\ \# \\ \# \\ \# \\ \# \\ \# \\ \# \\ \# \\ \# \\ \# \\ \# \\ \# \\ \# \\ \# \\ \# \\ \# \\ \# \\ \# \\ \# \\ \# \\ \# \\ \# \\ \# \\ \# \\ \# \\ \# \\ \# \\ \# \\ \# \\ \# \\ \# \\ \# \\ \# \\ \# \\ \# \\ \# \\ \# \\ \# \\ \# \\ \# \\ \# \\ \# \\ \# \\ \# \\ \# \\ \# \\ \# \\ \# \\ \# \\ \# \\ \# \\ \# \\ \# \\ \# \\ \# \\ \# \\ \# \\ \# \\ \# \\ \# \\ \# \\ \# \\ \# \\ \# \\ \# \\ \# \\ \# \\ \# \\ \# \\ \# \\ \# \\ \# \\ \# \\ \# \\ \# \\ \# \\ \# \\ \# \\ \# \\ \# \\ \# \\ \# \\ \# \\ \# \\ \# \\ \# \\ \\		N O				rom	to the	Feet	Feet	Feet	Feet		Dept.					-	



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Existing Bldg



SUBMIT: <u>CÓMPLETED</u> APPLICATION, STATEMENT AND FEE TO: Bayfield County
Planning and Zoning Depart.
PO Box 58
Washburn, WI 54891
(715) 373-6138

> BAYFIELD COUNTY, WISCONSIN APPLICATION FOR PERMIT



Bayfield Co.

		The state of the s	
Refined	Amount Paid:	Date:	Permit #:
	\$75 1013-16	10-211-16	16-6379

INSTRUCTIONS: No permits will be issued until all fees are paid. Checks are made payable to: Bayfield County Zoning Department

TENNITS HAVE BEEN					
Owner's Name:	SANITARY SPECIAL USE SPECIAL USE Mailing Address: City/State/Zip:	CITY CONDITION	City/State/Zip:		□ B.O.A. □ OTHER
POUL P. CADOME	25930 STANKT, RO BAN FIELD, WI SH	2T. RO B	ou held, i	814	715-719-3126
Address of Property:	City/State/Zip:				Cell Phone: コール・マンファ
					1716 -602
Contractor: ? SEAN CADOHE	Contractor Phone: $779-5639$	Plumber:			Plumber Phone:
Authorized Agent: (Person Signing Application on behalf of Owner(s))	Agent Phone:	Agent Mailing A	Agent Mailing Address (include City/State/Zip):	state/Zip):	Written Authorization Attached
PROJECT	PIN: (23 digits)			Recorded Documen	Recorded Document: (i.e. Property Ownership
Legal Description: (Use Tax Statement)	5238	Ã		Volume 307	307 Page(s) 228
S.E. 1/4, S.E. 1/4 5.67c' of 10.33c' of 6.60 GO Lot(s)	CSM Vol & Page	ige Lot(s) No.	o. Błock(s) No.	Subdivision:	
Section , Township S C N, Range S W		BAYTIEU		Lot Size	Acreage S

			, 0	000	<u>γ</u>		Value at Time of Completion * include donated time & material	X Non-Shoreland	Shoreland —	
	Property	Run a Business on	□ Relocate (existing bldg)	Conversion	☐ Addition/Alteration	X New Construction	Project		☐ Is Property/Land within 1000 feet of Lake, Pond or Flowage If yescontinue	Creek or Landward side of Floodplain? If yes.—continue
4215X	☐ Foundation	□ No Basement	Basement	2-Story	☐ 1-Story + Loft	X 1-Story	# of Stories and/or basement		n 1000 feet of Lake, Pon	of Floodplain? If ye
					K Year Round	Seasonal	Use		Pond or Flowage If yescontinue	If yescontinue>
	,	₹ None		3	□ 2	_ <u>1</u>	# of bedrooms	-	Distance Stru	Distance Stru
□ None	☐ Compost Toilet	☐ Portable (w/service contract)	☐ Privy (Pit) or Vaulted (min 200 gallon)	反 Sanitary (Exists) Specify Type: Wg エルカ	☐ (New) Sanitary Specify Type:	□ Municipal/City	What Type of Sewer/Sanitary System Is on the property?		Distance Structure is from Shoreline : feet	feet
		ntract)	ılted (min 200 gallon	ify Type: Mg エルム	fy Type:		oe of ry System operty?		□ Yes XNo	Is Property in Floodplain Zone?
		<u></u>			_ Xwell	☐ City	Water		□ Yes X No	Are Wetlands Present?

 \square Is Property/Land within 300 feet of River, Stream

Distance Structure is from Shoreline:

Existing Structure: (if permit being applied for is relevant to it)
Proposed Construction:

Length:

30

width:

Ŧ

Height:

0

Proposed Use	<	Proposed Structure	Dimensions	Square Footage
Day'd for legisons		Principal Structure (first structure on property)	(x)	
200		Residence (i.e. cabin, hunting shack, etc.)	(x	
		with Loft	(x)	
X Residential Ose		with a Porch	(x)	
		with (2 nd) Porch	×	
SECRETARION DIGITALISM		with a Deck	(×	
		with (2 nd) Deck	(×	
☐ Commercial Use		with Attached Garage	(x)	
		Bunkhouse w/ (☐ sanitary, or ☐ sleeping quarters, or ☐ cooking & food prep facilities)	(x)	
		Mobile Home (manufactured date)	(x)	
		Addition/Alteration (specify)	(x)	
Winnicipal Use	×	Accessory Building (specify) らみてのなら	(30 X24)	720
-		Accessory Building Addition/Alteration (specify)	(x)	
			•	
***************************************		Special Use: (explain)	(x)	
***************************************		Conditional Use: (explain)	(x)	
		Other: (explain)	(×)	

FAILURE TO OBTAIN A PERMIT OF STARTING CONSTRUCTION WITHOUT A PERMIT WILL RESULT IN PENALTIES any accompanying information) has been examined by me (us) and to the best of my (our) knowledge and belief it is true, correct and complete. I (we) acknowledge that I (we) am (are) responsible for the detail and accuracy of all information I (we) am (are) providing and that it will be relied upon by **Bayfield County** in determining whether to issue a permit. I (we) further accept liability which may be a result of **Bayfield County** relying on this information I (we) am (are) providing in or with this application. I (we) consent to county officials charged with administering county ordinances to have access to the above described property at any reasonable time for the purpose of inspection.

	Authorized Agent:	(If there are Multip	Owner(s):
(If you are signing on behalf of the owner(s) a letter of authorization must accompany this application)	nt:	(If there are Multiple Owners listed on the Deed All Owners must sign or letter(s) of authorization must accompany this application)	Owner(s): Poul R. Callette.

Address to send permit

Date 10-N 2016

Date

Please complete (1) - (7) above (prior to continuing)

(8) Setbacks: (measured to the closest point)

Changes in plans must be approved by the Planning & Zoning Dept.

visible from one previously surveyed corner to the	undary line from which the setback must be measured must be visible from one previous	, the bo	um required setback	t of the minim	Prior to the placement or construction of a structure within ten (10) feet of the minimum required setback, the boundary line from which the setback must be measured must be	
			Feet		Setback to Privy (Portable, Composting)	
			Feet		Setback to Drain Field	
119' Feet	Setback to Well		Feet	bhi	Setback to Septic Tank or Holding Tank	
Feet	Elevation of Floodplain		' Feet	203	Setback from the East Lot Line	·
Yes No	20% Slope Area on property		Feet	110'	Setback from the West Lot Line	
Feet	Setback from Wetland		خ Feet	Rond	Setback from the South Lot Line	
			eet Feet	230	Setback from the North Lot Line	_
Feet	Setback from the Bank or Bluff					
Feet	Setback from the River, Stream, Creek		Feet		Setback from the Established Right-of-Way	
Feet	Setback from the Lake (ordinary high-water mark)		5' Feet	395	Setback from the Centerline of Platted Road	
Measurement 💮 💮	Description		Measurement	Me	Description	383120

Prior to the placement or construction of a structure more than ten (10) feet but less than thirty (30) feet from the minimum required setback, the boundary line from which the setback must be measured must be visible from one previously surveyed corner to the other previously surveyed corner, or verifiable by the Department by use of a corrected compass from a known corner within 500 feet of the proposed site of the structure, or must be marked by a licensed surveyor at the pwner's expense. (9) Stake or Mark Proposed Location(s) of New Construction, Septic Tank (ST), Drain field (DF), Holding Tank (HT), Privy (P), and Well (W),

NOTICE: All Land Use Permits Expire One (1) Year from the Date of Issuance if Construction or Use has not begun.
For The Construction Of New One & Two Family Dwelling: ALL Municipalities Are Required To Enforce The Uniform Dwelling Code.
The local Town, Village, City, State or Federal agencies may also require permits.

Hold Continue	Signature of Inspector:	sleeping purposes & shall his	Buildrey shall not be used for Junan betterton	Date of Inspection: $ D-2D- C$ Inspected by: $ D-2C C$ Inspected by: $ D-2$	Inspection Record: o when present - Sife Staked	Was Parcel Legally Created XYes □ No Structure Was Proposed Building Site Delineated XYes □ No Structure	Granted by Variance (B.O.A.) Properties 1 No Case #:	Is Parcel a Sub-Standard Lot	Permit #: 16-0379 Permit Date: 10-21-16	Permit Denied (Datë): Reason for Denial:	Issuance Information (County Use Only) Sanitary Number: 12-305
		to previous p	human helitata	Inspected by: \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \		Were Property Lines Represented by Owner Was Property Surveyed	Previously Granted by Variance (B.O.A.) ☐ Yes ☐ No Case #;	Mitigation Required ☐ Yes Vo 1	6		30 S # of bedrooms:
	Date of Approval:	water of fath	1 D	Date of Re-Inspection:	Zoning District (R.) A Lakes Classification (A)	Over Transport of the Control of the		Affidavit Required			Sanitary Date: